

PATENT APPLICATION

Attorney Docket No.: 108407

AMENDMENT TRANSMITTAL PROPINED TO 1200

Group Art Unit: 1774

C. Thompson Examiner:

PAPER INCLUDING A MULTITONE-EFFECT WATERMARK, AND A WIRE FOR

MANUFACTURING THE PAPER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

OLIFF & BERRIDGE, PLC

Facsimile: (703) 836-2787

In re the Application of

Stephane MALLOL et al.

Application No.: 09/764,096

January 19, 2001

P.O. Box 19928

Sir:

Filed:

For:

Transmitted herewith is an Amendment in the above-identified application.

Entitlement to small entity status is hereby asserted.

Small entity status of this application has been established.

The filing fee has been calculated as shown below:

	(Column 1)	(Column 2)	(Column 3)	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	
TOTAL CLAIMS	*32 MINUS	**20	=12	
INDEP CLAIMS	*4 MINUS	***3	=1	
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY			
BIV			
RATE	ADD'L FEE		
x 9	\$		
x_43	\$		
+145	S		
	\$		

OTHER THAN A SMALL ENTITY				
ΩR	RATE	ADD'L FEE		
	x 18	\$ 216		
	x 86	\$ 86		
OR	+290	\$		
•		\$ 302		

- If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Check No. 147053 in the amount of \$302.00 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

William P. Berridge Registration No. 30,024

Seth S. Kim

Registration No. 54,577

WPB:SSK/tbh

Date: October 3, 2003